

CALIFORNIA STATE DEPARTMENT OF PUBLIC HEALTH

WALTER M. DICKIE, M.D., Director

Weekly Bulletin

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GUY P. JONES
EDITOR

Deaths in California and the United States Registration Area

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A comparison of California death rates for the year 1928 with similar rates for the United States Registration Area (which comprises most of the states) indicates a lower ratio of California deaths from most of the communicable diseases (with the exception of tuberculosis). A larger proportion of California individuals, however, died of those diseases which commonly claim the lives of people who are past middle age. In other words, California last year made marked progress in saving the lives of its children from death by communicable diseases, but, according to the records, progress was not made in the prevention of deaths of adults from cancer, heart disease, nephritis and other causes. The higher death rates for these diseases may be attributed, largely, to the migration of large numbers of adults who have reached the age of retirement and who have come to California to spend their last years under our favorable climatic conditions. The high death rate for tuberculosis may also be attributed to a similar migration of large numbers of individuals who are suffering from tuberculosis in an advanced stage.

Organized Effort Helps.

Health departments and public health workers throughout the state can justifiably claim a part of the credit for the lower death rates for most of the communicable diseases that prevailed last year. Among the communicable disease death rates which were lower than those for the United States are typhoid

fever, malaria, smallpox, measles, scarlet fever, diphtheria, dysentery and erysipelas.

Mothers and Babies Fare Well.

The death rates for mothers and babies were also considerably lower in California than those for the rest of the country. These pertain particularly to the intestinal disturbances and diseases of early infancy which ordinarily takes the lives of so many infants. The death rate for mothers in childbirth was also considerably lower for California than for the United States as a whole.

Accident Death Rate High.

Among the causes of death for which the California rate was higher last year are tuberculosis, cancer, cerebral hemorrhage, diseases of the heart, nephritis, accidental and unspecified external causes, and automobile accidents. The high death rate for accidental causes may be attributed, in a large measure, to the wider range of opportunities that are provided for development and construction work in western states.

More Deaths From Drowning.

In spite of the high tuberculosis death rate in California, significant progress has been made in reducing the death rate for this disease. It has been almost cut in two during the past decade, and the decrease in this rate from 1927 to 1928 was from 135.3 to 133.2. Significant among increases from 1927 to 1928 was accidental drowning, which increased from 9.0 to 14.2,

and automobile accidents (excluding collisions with railroad trains and street cars) from 36.7 to 38.5.

1928 DEATH RATES CALIFORNIA AND U. S. REGISTRATION AREA

	Rates per 100,000 population	
	Calif- ornia	U. S. regis- tration area
General death rate.....	14.51	12.0
Typhoid and paratyphoid fever.....	2.3	4.9
Malaria	0.4	3.6
Smallpox	*	0.1
Measles	0.7	5.4
Scarlet fever	1.3	1.9
Whooping cough	7.9	5.4
Diphtheria	5.9	7.2
Influenza	47.3	45.2
Dysentery	1.9	2.8
Erysipelas	1.9	2.4
Acute anterior poliomyelitis.....	1.6	1.2
Lethargic encephalitis	1.2	1.2
Meningococcus meningitis	2.6	2.6
Tuberculosis (all forms).....	133.2	79.2
Of the respiratory system.....	119.7	70.1
Of the meninges, central nervous system.....	4.8	3.0
Other forms	8.7	6.1
Syphilis	23.8	14.7
Cancer and other malignant tumors.....	141.0	95.9
Rheumatism	3.4	3.8
Pellagra	1.2	6.1
Diabetes mellitus	21.6	19.0
Meningitis (nonepidemic)	2.4	2.0
Cerebral hemorrhage and softening.....	101.0	87.0
Paralysis without specified cause.....	3.5	5.1
Diseases of the heart.....	287.8	207.7
Diseases of the arteries, atheroma, aneurysm, etc.	30.7	21.9
Bronchitis	5.9	5.2
Pneumonia (all forms)	96.3	98.0
Respiratory diseases other than bronchitis and pneumonia (all forms)	10.9	8.7
Diarrhea and enteritis	23.7	26.8
Diarrhea and enteritis (under 2 years).....	18.4	20.7
Diarrhea and enteritis (2 years and over).....	5.3	6.2
Appendicitis and typhlitis.....	17.9	15.2
Hernia, intestinal obstruction.....	14.0	10.4
Cirrhosis of the liver	12.7	7.5
Nephritis	102.3	95.0
Puerperal septicemia	4.5	5.0
Puerperal causes other than puerperal septicemia	6.6	8.7
Congenital malformations and diseases of early infancy	55.1	65.6
Suicide	29.4	13.6
Homicide	8.3	8.8
Accidental and unspecified external causes.....	113.3	79.2
Burns (conflagration excepted).....	6.1	5.5
Accidental drowning	14.2	7.1
Accidental shooting	2.4	2.5
Accidental falls	18.8	14.1
Mine accidents	0.5	2.3
Machinery accidents	2.8	1.9
Railroad accidents	6.2	5.9
Collision with automobile.....	2.5	1.8
Other railroad accidents.....	3.6	4.2
Street-car accidents	2.2	1.4
Collision with automobile.....	0.8	0.5
Other street-car accidents	1.4	0.9
Automobile accidents (excluding collision with railroad trains and street cars).....	38.5	20.8
Injuries by vehicles other than railroad trains, street cars, and automobiles.....	3.4	1.6
Excessive heat (burns excepted).....	0.5	0.6
Other external causes.....	17.5	15.6
All other defined causes.....	123.0	108.4
Unknown or ill-defined causes	2.2	20.6

*Less than one-tenth of one.

SAN JOAQUIN COUNTY CARES FOR CRIPPLED CHILDREN

The San Joaquin County Society for Crippled Children held its annual meeting in Stockton on the afternoon of Friday, December 6, 1929, at the auditorium of the Chamber of Commerce. The officers of the association for the present are: Charles B. Pearson, of Stockton, president; Mrs. E. C. Woodruff, of Manteca, vice president; Mrs. Thomas F. Baxter of Stockton, treasurer, and John J. Sippy, of Stockton, executive secretary.

The report of the secretary indicates 339 memberships including memberships of various civic clubs which have taken out associate memberships. The treasurer's report indicated total expenditures for the year for care of children who were not entitled to public aid as \$1,917.17. The report also indicated a deficit.

President Pearson urges an annual renewal of memberships and also new memberships by those who have not as yet, but would like to participate in this splendid movement. Memberships are as follows: Ordinary membership, \$1 to \$5; contributing membership, \$5 to \$10; sustaining membership, \$10 to \$100; life membership \$100 or more. Any civic club or group may take out associate or group memberships.

In his annual message which follows, President Charles B. Pearson submitted a resume of the work which had been accomplished in the past two or three years:

The crippled children's work in San Joaquin County has for the past three years been carried along in such an orderly and systematic manner that it is doubtful that many people realize the amount of work which has been accomplished.

As you will remember, the first case-finding clinic, sponsored by the San Joaquin County Medical Society, was held in November, 1926. At that time 93 persons presented themselves for examination and diagnosis; the work of such examination and diagnosis having been performed by Drs. Howard H. Markel, E. C. Clary and Frederick Bost of San Francisco and by our own Dr. J. D. Dameron. The number of crippled children who were not receiving care and aid was quite startling and, as a result, the County Medical Society felt that regular case-finding and treatment clinics were a real necessity. With the good services of Dr. Howard H. Markel of the University of California, the Medical Society sponsored such a series of clinics to be held at monthly intervals at the Health Center of the San Joaquin Local Health District. The first of these was held in February, 1927, and it is interesting to review the amount of work done since that period and up to December 1st of this present year.

The total number of patients seen in the clinic has been 402. Not all of these, of course, have come from our own county, since with the meagerness of facilities in some of the surrounding counties, such as Stanislaus, Amador, Calaveras and Tuolumne, it has been necessary to admit some persons from these counties.

These patients have made 1359 visits, during which they received 310 fittings and adjustments of braces and the application of 258 plaster casts. Eighty-two patients have been recommended for physiotherapy treatments, 108 recommended for hospitalization and 126 returned to private physicians.

The Crippled Children's Act passed by the legislative assembly of 1927 by which those patients who were not able to care

for themselves might secure county aid, offered hope for the care of many cases. Since it took effect in August, 1927, through the good offices of local attorneys, among which the law firm of Langdon & Tope has been most active, 13 children have been committed for such county aid from San Joaquin County and one from Calaveras County.

Before the inauguration of this act, and even for a short period after, during which funds were not available, service clubs throughout the county were requested to sponsor a number of cases, and this was done gladly and willingly. However, the burden was rather unevenly distributed and some other means for an equable distribution of expense was sought for. As you will remember, two years ago there gathered in this room representatives of 39 service clubs and civic organizations from all over the county, and as a result of the meeting, the San Joaquin County Society for Crippled Children was organized. We may say without boasting that this organization has set a pattern for the rest of California and it is much quoted as a model of such an organization for the entire country. It is frequently said by many from outside of our county, and these having had much experience are in a position to know, that the work in San Joaquin County is the most thorough piece of work which has ever been performed along this line.

Of course, the care and physical rehabilitation of the crippled child is no light task, and since it requires in many cases weeks, and even months, of hospitalization and care, the expense is not at all small. It may interest you to know that in the past two years, for which accurate figures are available, there has been expended in this work in this county alone the following sums:

By the San Joaquin County Welfare Department	\$1,626 24
By San Joaquin County, from Crippled Children Fund	5,058 50
By service clubs	6,976 72
Crippled children society	2,599 31
Total	\$16,260 77

This does not include expense of cases which have been cared for at Bret Harte, the San Joaquin General Hospital, and Dameron's and St. Joseph's Hospitals, which have generously cooperated in provision of free beds for emergency operative cases, the latter supported by the Catholic Ladies' Aid. Nor does it include sums expended by parents and relatives who have been able to provide finances in whole or in part for care of their own afflicted ones. It is probably safe to say that the total would reach a sum of \$25,000.

Nor is our task finished when we have restored these patients to as nearly physically normal as possible, for even after they must be fostered for years to come, both as regards physical care and muscle training, and more especially education and vocational training which permit them to become self-respecting and self-supporting citizens.

A great many persons believe that the California Crippled Children's Act makes ample provision for the care of all of the physically handicapped. That this is not true is exemplified by the fact that only fourteen of the many patients passing through the clinic have been availed of its provisions, and that the larger number need only temporary financial assistance. Our society constitutes an agency for this need and has proved a clearing house which makes social and financial investigations and classifies and advises of the merits of each case. It is not a duplication of any other organized effort.

We hope that every individual here will not only get the idea, but will pass it on to others, that we are engaged in a work which requires the sympathy and financial support of every taxpayer and of every person who is inclined to expend money in a cause that can not help but yield rich results.

Therefore, when we build, let us think that we build—forever. Let it not be for present use alone, let it be such work as our descendants will thank us for, and let us think, as we lay stone on stone, that a time is to come when those stones will be held sacred because our hands have touched them and that men will say as they look upon the labor and the wrought substance of them, "See! this our fathers did for us."—*John Ruskin*.

A. P. H. A. WILL MEET IN TEXAS

The fifty-ninth annual meeting of the American Public Health Association will be held in Fort Worth, Texas, during the week of October 27, 1930, with the Hotel Texas as headquarters.

The annual meetings of this oldest and strongest of public health organizations bring together for a week of scientific discussion, all of the public health leaders of the continent. It is always the most important health convention of the year. Health officers, nurses, dieticians, sanitary engineers, child and industrial hygienists—all of the specialists that make up the public health profession—meet to consider their common problems. Each of the ten sections of the association—Health Officers, Laboratory, Vital Statistics, Public Health Engineering, Public Health Nursing, Public Health Education, Food, Drugs and Nutrition, Industrial Hygiene, Child Hygiene and Epidemiology—arrange an individual program and there are a number of general sessions to which the public is invited.

SEWAGE DISPOSAL AT FOLSOM PRISON

The Bureau of Sanitary Engineering has held a conference with engineers of the Department of Public Works relative to a new sewage treatment plant for Folsom Prison. This plant will be of the very latest design and will incorporate automatically cleaned screens, or "rag pickers," the screenings being pushed into an incinerator and burned. The screened sewage passes on through a preliminary clarifier in which oil and floating debris are automatically skimmed off into a sump and the settlings are automatically removed to a closed digester. The sewage then passes through an activated sludge plant constructed according to the latest type of efficiency. The final clarified effluent is certain to be "clear as crystal."

The city of Chico has just put into use a new sewage plant which embodies digestion of the sludge in a closed tank. The gasses formed, which are combustible, are trapped and passed through a thermostatically controlled heater, whereby a stream of circulating water is heated and returns through the sludge mass in coils of pipe, to maintain the sludge at the proper temperature for the best activity of the organisms that digest the sludge. It may be added that through modern developments in sewage disposal in some districts of the Middle West where corn husks are digested in closed digestors, combustible gases are recovered in quantity sufficient to produce enough gas to supply the needs of whole cities.

MORBIDITY *

Diphtheria.

86 cases of diphtheria have been reported, as follows: Alameda County 2, Berkeley 2, Emeryville 1, Oakland 4, Piedmont 2, Eureka 1, Los Angeles County 10, Alhambra 2, Arcadia 1, Glendale 2, Long Beach 1, Los Angeles 23, Santa Monica 2,

*From reports received December 9th and 10th for the week ending December 7th.

Monterey 3, Blythe 1, Sacramento County 1, Sacramento 2, Needles 1, San Diego 2, San Francisco 7, Stockton 2, San Luis Obispo County 1, Paso Robles 2, Stanislaus County 1, Tulare County 1, Tuolumne County 6, Sonora 3.

Scarlet Fever.

349 cases of scarlet fever have been reported, as follows: Alameda County 2, Alameda 4, Berkeley 3, Oakland 35, Piedmont 5, Calaveras County 1, Colusa County 3, Contra Costa County 1, Pittsburg 1, Richmond 7, Placerville 1, Fresno County 7, Fresno 5, Reedley 2, Humboldt County 3, Eureka 1, Bakersfield 5, Los Angeles County 9, Alhambra 2, Compton 1, Culver City 1, El Segundo 5, Glendora 1, Huntington Park 1, Inglewood 1, Long Beach 4, Los Angeles 53, Pasadena 1, San Fernando 3, San Gabriel 1, Santa Monica 4, Whittier 2, South Gate 2, Madera County 1, Madera 1, Marin County 2, San Rafael 1, San Quentin 1, Merced County 2, Monterey County 1, Carmel 1, Monterey 2, Pacific Grove 1, Salinas 5, Orange County 5, Anaheim 1, Huntington Beach 2, Santa Ana 1, Sacramento County 2, Sacramento 24, Ontario 2, Upland 1, San Diego County 1, National City 1, San Diego 7, San Francisco 49, San Joaquin County 16, Lodi 8, Manteca 4, Stockton 3, San Luis Obispo County 1, Arroyo Grande 1, Daly City 1, Redwood City 1, San Mateo 1, Menlo Park 2, Santa Clara County 5, San Jose 4, Santa Cruz County 1, Sonoma County 2, Sebastopol 2, Stanislaus County 2, Tehama County 1, Tulare County 1, Sonora 1, Yolo County 1.

Smallpox.

29 cases of smallpox have been reported, as follows: Los Angeles County 4, Long Beach 1, Pomona 2, Monterey County 1, Salinas 1, Grass Valley 1, Nevada City 3, Redlands 4, San Joaquin County 1, Stockton 1, San Luis Obispo County 3, Arroyo Grande 1, Stanislaus County 4, Tulare County 2.

Typhoid Fever.

4 cases of typhoid fever have been reported, as follows: Alameda 1, Santa Clara County 1, California ** 2.

Whooping Cough.

95 cases of whooping cough have been reported, as follows: Oakland 7, Calaveras County 1, Pittsburg 1, Orland 1, Los Angeles County 6, El Monte 4, Hermosa 1, Long Beach 4, Los Angeles 10, Pasadena 1, Whittier 1, South Gate 2, Monterey County 2, Calistoga 1, Orange County 4, Fullerton 3, Santa Ana 6, Sacramento 2, Oceanside 1, San Diego 21, San Francisco 1, Manteca 3, Stockton 2, San Jose 5, Benicia 1, Tulare County 1, Tuolumne County 1, Yolo County 2.

Measles.

184 cases of measles have been reported, as follows: Alameda County 1, Alameda 2, Oakland 1, Calaveras County 1, Los Angeles County 5, Los Angeles 3, Ft. Bragg 1, Riverside County 1, Sacramento 1, San Francisco 149, San Joaquin County 11, Stockton 3, Daly City 1, Santa Barbara County 1, Santa Cruz County 1, Sutter County 2.

Food Poisoning.

29 cases of food poisoning have been reported from Los Angeles.

Poliomyelitis.

2 cases of poliomyelitis have been reported, as follows: Los Angeles 1, San Diego 1.

Coccidioidal Granuloma.

2 cases of coccidioidal granuloma have been reported, as follows: Burbank 1, Santa Clara County 1.

Meningitis (Epidemic).

9 cases of epidemic meningitis have been reported, as follows: Fresno County 1, Humboldt County 1, Los Angeles 2, Sacramento 1, San Diego 2, San Francisco 1, San Joaquin County 1.

**Cases charged to "California" represent patients ill before entering the state or those who contracted their illness traveling about the state throughout the incubation period of the disease. These cases are not chargeable to any one locality.

COMMUNICABLE DISEASE REPORTS

Disease	1929				1928			
	Week ending			Reports for week ending Dec. 7 received by Dec. 10	Week ending			Reports for week ending Dec. 8 received by Dec. 11
	Nov. 16	Nov. 23	Nov. 30		Nov. 17	Nov. 24	Dec. 1	
Actinomycosis	0	0	0	0	0	0	1	0
Botulism	0	0	0	0	0	0	0	1
Chickenpox	208	311	294	396	226	253	237	216
Coccidioidal Granuloma	1	5	2	2	1	0	2	0
Diphtheria	76	109	79	86	110	124	77	92
Dysentery (Amoebic)	1	1	1	0	1	2	1	0
Dysentery (Bacillary)	6	3	2	0	0	0	2	0
Encephalitis (Epidemic)	0	1	1	1	1	1	7	3
Erysipelas	9	20	15	13	8	11	17	0
Food Poisoning	0	6	0	29	2	1	4	0
German Measles	5	11	7	11	9	3	5	6
Gonococcus Infection	101	129	114	131	109	101	113	106
Hookworm	0	0	0	1	0	0	1	0
Influenza	40	40	67	69	2,803	5,155	10,102	10,296
Jaundice (Epidemic)	0	0	1	0	0	0	0	1
Leprosy	0	4	0	1	0	0	0	2
Malaria	2	3	0	2	0	2	0	1
Measles	73	136	133	184	12	20	29	21
Meningitis (Epidemic)	7	10	7	9	0	12	9	8
Mumps	256	363	296	362	182	212	152	177
Ophthalmia Neonatorum	0	0	0	1	0	0	0	0
Paratyphoid Fever	0	0	0	0	1	0	0	0
Pneumonia (Lobar)	49	57	90	85	53	121	253	192
Poliomyelitis	3	3	2	2	4	6	7	0
Rabies (Animal)	14	20	13	15	5	16	20	12
Scarlet Fever	243	290	344	349	169	191	192	180
Smallpox	35	67	40	29	18	28	18	21
Syphilis	170	132	121	140	123	148	115	145
Tetanus	1	1	1	2	1	0	3	0
Trachoma	3	2	3	1	1	1	4	4
Trichinosis	0	0	0	0	0	0	1	2
Tularemia	3	1	2	0	0	0	0	0
Tuberculosis	215	154	184	178	177	232	207	193
Typhoid Fever	13	12	5	4	5	5	6	4
Undulant Fever	4	2	0	0	1	0	0	0
Whooping Cough	91	125	84	95	136	129	121	137
Totals	1,629	2,018	1,908	2,198	4,158	6,774	11,706	11,820

Scarlet Fever, mumps and chickenpox are the most prevalent of all the reportable diseases.

Hookworm is seldom reported in California—one case was reported last week.

Smallpox was less prevalent last week.

Influenza is not showing any signs of becoming epidemic.